MORRISON | FOERSTER

12531 THOLEBLUFF DRIVE

SUITE 100

SAN DIEGO, CALIFORNIA

92130-2040

TELEPHONE: 858.720.5100 FACSIMILE: 858.720.5125

MWW.MOFO.COM

MORRISON & PORRETER LIP

NEW YORK, SAN FRANCISCO, LOS ANGELES, PALO ALTO, SAN DIEGO, WASHINGTON, D.C.

DENVER, NORTHERN VIRGINIA, ORANGE COUNTY, SACRAMENTO, WALNOT GREEN, CENTURY CITY

TORYO, LONDON, BRIJING, SHANGHAL, HONG KONG, SINGAPORE, BRUSSRES

REGEIVED CENTRAL FAX GENTER

| То:                                       | FACSIMILE:     | Telephone: |  |
|---|----------------|------------|--|
| U.S. Patent and Trademark Office<br>MS AF | (571) 273-8300 |            |  |

FROM: James J. Mullen III, Ph.D. - Reg. No. 44,957

DATE:

December 1, 2005

Number of pages with cover page: 6

Originals or hard copy will not follow.

Preparer of this slip has confirmed that facsimile number given is correct:

10598/gly1

If you do not receive all pages, please call (858) 720-7972 as soon as possible.

## **CAUTION - CONFIDENTIAL**

If your receipt of this transmission is in error, please notify this firm immediately by collect call to sender at (858) 720-7972 and send the original transmission to us by return mail at the address below.

This facsimile contains confidential information which may also be privileged. Unless you are the addressee (or authorized to receive for the addressee), you may not copy, use, or distribute it. If you have received it in error, please advise Morrison & Foerster LLP immediately by telephone or facsimile and return it promptly by mail.

## Comments:

ATTORNEY DOCKET: 140942000401

GROUP ART UNIT:

1646

EXAMINER:

E. O'Hara

SERIAL NO.:

09/840,795

FILING DATE:

April 23, 2001

INVENTOR(S):

Erin E. MURPHY et al.

TITLE:

BINDING COMPOUNDS FOR A RANK-LIKE PROTEIN

(AS AMENDED)

## Papers attached:

- 1. Transmittal (1 page)
- 2. Fee Transmittal (1 page + duplicate for fee processing)
- 3. Petition for Extension of Time (I page)
- 4. Notice of Appeal (1 page)

IF YOU DO NOT RECEIVE ALL OF THE PAGES, PLEASE CALL GRACE YU AT (858) 720-7972 AS SOON AS POSSIBLE.

SD-291476

|  |  | U.S. Patent and Tradem                               | PTO/SB/21 (09-04<br>wed for use through 07/31/2008. OMB 0851-003<br>ark Office; U.S. DEPARTMENT OF COMMERCI |  |
|--|--|--|---|--|
| Under the Paperwork Reduction Act of 1995, no pan              | es al betuper, ena enoa                                  | pond to a collection of inform<br>Application Number | otion unless it displays a valid OMB control numbe  |  |
| TRANSMITTAL<br>FORM  |  | Filing Date  |   |  |
|  |  | First Named Inventor                                 | April 23, 2001  |  |
|  |  | Art Unit   | Erin E. MURPHY  |  |
| (to be used for all correspondence after                       | (to be used for all correspondence after initial filing) |  | 1646  |  |
|  |  | Examiner Name  | E. O'Hara   |  |
| Total Number of Pages In This Submiss                          | sion 6   | Attorney Docket Numb                                 | er 140942000401   |  |
| EN   | ICLOSURES  | (Check all that app                                  | oly)  |  |
| X Fee Transmittal Form (1 page + duplicate for fee processing) | Drawing(ş)   |  | After Allowance Communication to TC   |  |
| Fee Attached   | Licensing-rel  | ated Papers  | Appeal Communication to Board of<br>Appeals and Interferences   |  |
| Amandmant/Reply  | Petition   | :  | X Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) (1 page)                                   |  |
| After Final  | Petition to Co<br>Provisional A                          |  | Proprietary Information   |  |
| Affidavits/declaration(s)                                      |  | rney, Revocation<br>rrespondence Address             | Status Letter   |  |
| X Extension of Time Request (1 page)                           | Terminal Disc  | claimer  | Other Enclosure(s) (please Identify below);   |  |
| Express Abandonment Request                                    | Request for  | Refund   | Facsimile coversheet (1 page)   |  |
| Information Disclosure Statement                               | CD, Number   | of CD(s)   |   |  |
| Certified Copy of Priority<br>Document(s)                      | Landsc   | ape Table on CD                                      |   |  |
| Reply to Missing Parts/<br>Incomplete Application              | Remarks  |  |   |  |
| Reply to Missing Parts under<br>37 CFR 1.52 or 1.53            | Customer No.   | 25225  |   |  |
|  |  |  |   |  |
|  |  |  |   |  |
|  | JRE OF APPLICA   | NT, ATTORNEY, OR                                     | AGENT   |  |
| Firm Name MORRISON & FOE                                       | RSTER LLP  |  |   |  |
| Signature  | the  | 2  |   |  |
| Printed name dames J Myllen III,                               | Ph.D.  |  |   |  |
| December 1, 2005   | <b>_</b>   | Reg. No.   | 44,957  |  |
|  |  | <u> </u>   | ,   |  |
|  |  |  |   |  |
|  |  |  |   |  |
| I hereby certify that this correspondence is b                 | eing facsimile transmi                                   | itled to MS AF of the Pater                          | nt and Trademar k Office, facsimile no.   |  |

sd-291472

Signature: \_

|   |  |                         | N.C. Balan                              | Appr                          | oved for use litrou<br>terk Office; U.S. D | gh 7/31/2006.              | /\$8/17 (12-04v2<br>OMB 0651-0032 | Ź           |
|---|--|-------------------------|---|-------------------------------|--|----------------------------|-----------------------------------|-------------|
| Under the Paperwork Reduction A                               | ct of 1985, no person are                | required to             | respond to a collection                 | on of Informati               | ion unicss II disple                       | ys a valid OME             | Ecution number                    | =<br>r.     |
| Effective on 1  | 2/08/2004                                |                         | ±                                       | Соп                           | plete if Kno                               | WD                         |                                   | ].          |
| Fees pursuant to the Consolidated Ap                          | propriations Act, 2005 (I                | I.R. 4918).             | Application Nur                         | mber                          | 09/840,795                                 |                            |                                   |             |
| FEE TRAN  | SMITTAL                                  | _                       | Filing Date                             |                               | April 23, 200                              | 1                          | ni<br>                            | ECEIVED     |
|   |  | _                       | First Named In                          | ventor                        | Erin E. MURI                               | PHY                        | CENTR                             | L FAX CENTE |
| For FY  | 2005                                     |                         | Examiner Name                           | •                             | E. O'Hara                                  |                            | _                                 | 1           |
| Applicant claims small entity                                 |  | 27                      | Art Unkt                                |                               | 1646                                       |                            | DEC                               | 0 1 2005    |
| TOTAL AMOUNT OF PAYMEN  | T (\$) 950.0                             | 0                       | Attorney Docket                         | : No.                         | 14094200040                                | )1                         |                                   |             |
| METHOD OF PAYMENT (ch   | eck all that apply)                      |                         |   |                               |  |                            |                                   | j           |
| Check Credit Card   | Money Order                              | Nor                     | L?                                      | (please ident                 |  |                            |                                   | ]           |
| X Deposit Account Deposit Acc                                 | auni Number: <u>03-1952</u>              | Oeposit Acc             | ount Name:                              | Mo                            | rrison & Foer                              | ster LLP                   |                                   |             |
| For the above-identified                                      | deposit account, the                     | Director is             | hereby authorize                        | ed to: (ched                  | k all that spply                           | ) .                        |                                   |             |
| x Charge fee(s) indic   | ated below                               |                         | Charg                                   | e fee(s) Ind                  | ficated below, (                           | except for t               | he filing fee                     |             |
| Charge any addition   | nal fee(s) or underpa<br>R 1.16 and 1.17 | yment of                | X Credit                                | any overps                    | syments                                    | •                          | _                                 |             |
| FEE CALCULATION   |  |                         |   |                               |  |                            |                                   |             |
| 1. BASIC FILING, SEARCH, AN                                   | D EXAMINATION F                          | EES                     | <u> </u>                                |                               |  |                            |                                   | 1           |
|   | FILING FEES                              | SEA                     | ARCH FEES                               | EXAMIN                        | IATION FEES                                | 3                          |                                   | Ė           |
| Application Type Fe   | Small Entity<br>⊕ (\$) Fee (\$)          | Fee (\$)                | Small Entity<br>Fee (\$)                | Fee (\$)                      | Small Entity<br>Fee (\$)                   | Foot                       | Paid (\$)                         |             |
|   | 500 150                                  | 500                     | 250                                     | 200                           | 100  |                            | .00                               |             |
|   | 200 100                                  | 100                     | 50                                      | 130                           | 65   |                            |                                   |             |
| •   | 200 100                                  | 300                     | 150                                     | 160                           | *-   |                            | .00                               |             |
|   |  |                         |   |                               | 80   | -                          | .00                               |             |
| l   |  | 500                     | 250                                     | 600                           | 300  |                            | .00                               |             |
|   | 200 100                                  | 0                       | 0                                       | 0                             | 0  | 0                          | .00                               |             |
| 2. EXCESS CLAIM FEES  |  |                         |   |                               |  | Eas (E)                    | Small Entity<br>Fee (\$)          |             |
| Fee Description Each claim over 20 (including R               | eicener)                                 |                         |   |                               |  | Fee (\$)                   |                                   | l           |
| Each independent claim over 3 (                               | •  |                         |   |                               |  | 50                         | 25                                | 5           |
| Multiple dependent claims                                     | memorită verzones)                       |                         |   |                               |  | 200<br>360                 | 100                               |             |
| _ ` `   | o Ess. (5)                               | Ean D                   | -14 (6)                                 |                               | Jula Danand                                |                            | 180                               |             |
| Total Claims Extra Claim                                      | <u> </u>                                 |                         | aid (\$)<br>00                          |                               | ultipie Depend                             |                            |                                   |             |
|   | <u>-</u> × = .                           |                         |   | <u></u>                       | <u>= (\$)</u><br>                          | <u>Fee Paid (5</u><br>0.00 | <br>51                            |             |
| Indep. Claims Extra Claim                                     | <u>s _Fcc (\$)</u> _                     |                         | ald (\$)                                |                               |  |                            |                                   |             |
|   | _ * " -                                  | 0.                      | 00                                      |                               |  |                            |                                   |             |
| 3. APPLICATION SIZE FEE  If the specification and drawing     | r aveard 100 -L                          | nf neno:                | mahudina -14-                           |                               | ad naav                                    |                            |                                   |             |
| If the specification and drawing listings under 37 CFR 1.52(c | s exceed too sheets                      | or paper (<br>ze fee du | excidence electricisms is \$250 (\$124) | onically till<br>for small as | eg sequence o:                             | r computer                 | ^                                 |             |
| sheets or fraction thereof. S                                 | ee 35 U.S.C. 41(a)(1                     | XG) and .               | 37 CFR 1.16(s).                         | or street CT                  | auty tot Gault                             | ل اعتدالانتانات            | *                                 | }           |
| Total Sheets Extra Si   | heats Number                             | of each as              | iditional 50 or frac                    |                               |  |                            | Pald (\$)                         |             |
| - 100 =<br>4. OTHER FEE(S)                                    |  |                         | (round up to a who                      | xe number) :                  | ×  |                            | 0.00                              |             |
| , · ·   | 1170 Can (                               |                         |   |                               |  |                            | Pald (\$)                         |             |
| Non-English Specification, S                                  | e llette on) poi uction                  | nuty disco              | unt)                                    |                               |  |                            | 0.00<br>0.00                      |             |
| Other (e.g., late filing surchar                              | ge): 140 i Nolice d                      | ou tor tes              | ponse within s                          | econd ma                      | nth  |                            | i0.00<br>i0.00                    |             |
| CHICAGO DAY   |  |                         | P 21.00 Milima                          |                               |  |                            |                                   |             |
| SUBMITTED BY  | )4/if =                                  |                         | Registration No.                        |                               | <del></del>                                |                            |                                   |             |
| Signature   |  | <b>字</b>                | (Attorney/Agent)                        | 44,957                        | Telephone                                  | (858) 72                   |                                   |             |
| Name (Print/Type) James J. Mulk                               | en III, Ph.D.                            |                         |   |                               | Date                                       | Decembe                    | r 1, 2005                         |             |
|   |  |                         |   |                               |  |                            |                                   |             |